## PART B - FEE(S) TRANSMITTAL

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CHARRINT CORRESPONDENCES ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of Feo(s) Transmittal. Th papers. Each additions have its own certificate	Note: A certificate of mailing can only be used for domestic mailings of the Feo(s) Transmittal. This certificate eatmot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
22242 7590 06/29/2006				Con	different of Maillon or Trans	emission	
FITCH EVEN TABIN AND FLANNERY 120 SOUTH LA SALLE STREET SUITE 1600				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Fostal Service with sufficient postage for first class mail in an envolope addressed to the Mail Stop ISSUE FEE address above, or being fuscinite transmitted to the USPTO (571) 273-2885, on the date indicated below.			
CHICAGO, IL 60603-3406				(Depositor's name)			
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				(Dsc)			
APPLICATION NO. FILING DATE			FIRST NAME	DINVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/935,756	08/21/2001	Allan B. Lamkin			71714	8902	
TITLE OF INVENTION: PRESENTATION OF MEDIA CONTENT FROM MULTIPLE MEDIA SOURCES							
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APPLN TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		900	\$1000	09/29/2006	
EXAMINER /		ART UN	ar	CLASS-SUBCLASS			
Dr. Little, Idea Indone		2173		715-716000			
I. Change of correspondent	e address or indication of "F	ee Address" (37	tting on the patent front page, li	st Thon	nas F. Lebens		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence).			(1) the names of up to 3 registered patent attorneys Fitch; Even, Tabin or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) uttsched.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3				
"Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Sonic Solutions, a California corporation, Novato, California							
Please check the appropriate assignee eategory or categories (will not be printed on the patent):							
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The Applicant is no longer claiming SMALL BATTY status, Sec 37 CFR 1 27(m)(2)							
The Privator of the USTYO is requested by usby the issue "for and Publication Feed (if any) or to a supply any previously gaid issues fee to the application identified above.  NOTE: The Issue Fee and Publication Feed (if any) or to 10 and 1							
Authorized Signature	4 /			Date		2006	
Typed or printed name	Thomas F. L	ebens	Registration No. 38221				
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